FILE MS	778	Species & G. Brain, Lond	
MAI D	ADA FINANCIA OSURE S (Attach accessary)	TATEMENT NO	Company of the Compan
DEAN HELLER SECRETARY OF STATE		2004 MAY 17 PM 4:	00
NAME RAYMOND G. WILSON MAILING ADDRESS P.O. BOX 300 CITY, STATE, ZIP MINDEN NU TELEPHONE (775) 782-372	DEP SYNDRETTE R	RESIDENCE IN NEVADA CLERE RESIDENCE IN DISTRICT WHERE REGIS NRS 281.571(1)(a) DEPU	TERED TO
List all public offices for which this finance Public Office MEMBER OF THE MINDS	Annual Ter Compensation Date A	AITHORE	APPOINTMENT to fill unexpired term of an elected or appointed public officer (within 30 days) NRS 281.559(1)(a)
List all general sources of income for yo	ou and members of your household	over 18 years of age [NRS 281.571, S	subsection 1(b)]:
	oped, REALLESTATE,	STYCKS, TRUSTER	Self Household Member
List each creditor to whom you or a me or deed of trust on real property which we vehicle for personal use was retained be	is not required to be listed below, a	ind (2) debt for which a security inte	sed by mortgage erest in a motor Self Household Member

List each business entity (i.e., organization or enterprise operated for econfirm, business, trust joint venture, syndicate, corporation or association) involved as a trustee, beneficiary of a trust, director, officer, owner in whole a class of stock or security representing 1% or more of the total outstanding INRS 281.571, Subsection 1(f)]:	with which you or a member of yo le or in part, limited or general part	our house iner, or h	ehold is older of
[NNO 201.071, Gubaccilon 1(1)].		Self	Household
	in in the second second	Sell	Member
THE WILSON DIVINGTISUST, SAND VILLALLE	Sandy REEF LLC	a	TH
THE TOTAL PROPERTY OF THE PARTY			
TISBURY LLC, SIMINNIESOTA LLC, CACTUS	STHORN WIC	19	4
The I are work to sale Tours			
THE LANGIERAK FAMILY TRUST		. Ц	
			П
		. Ц	Ш
List specific location and particular use of all real estate (other than persyour household has a legal or beneficial interest; (2) the fair market value state or an adjacent state [NRS 281.571, Subsection 1(c)]: Specific Location Specific Location CREAN CARROLL LA CARROLL LA LATH SOURCE CARROL	Particular Use RENTRUS	donor e third de	d in this
		Value of	Gift
MONE	\$	-0	
	\$		
	\$_		
	\$		
	\$		
THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND			
Date: MAY 17, 2004 Signature: horumos	nos D. W. Con		*



Page 1 of 2

STATE OF NEVADA COMMISSION ON ETHICS

MAY 2 0 2004

DEAN HELLER

DEAN HELLER

DECRETARY OF STATE

3476 Executive Pointe Way, Suite 16

Carson City, Nevada 89706-7946

(775) 687-5469 • FAX (775) 687-1279

2004 MAY 17 PH 4: 00

BARBARA REED CLERK

Diability.

Acknowledgment of Ethical Standards unlic Officers

(Required by NRS 281.552)

I hereby acknowledge that I have read and understand the statutory ethical standards for public officers and public employees provided in NRS Chapter 281. I acknowledge that I have (check all that apply):

reviewed the provisions of NRS Chapter 281 on-line from the Commission's website http://ethics.state.nv.us

reviewed the provisions of NRS Chapter 281 by requesting a copy thereof from the Commission office.

I understand that I am required to file this acknowledgment with the Nevada Commission on Ethics or the Secretary of State pursuant to NRS 281.561, and that refusal to execute and file this acknowledgment constitutes nonfeasance in office and is a ground for removal pursuant to NRS 283.440.

MAY 3, 2004	Janmer S. William
Date	Signature
775-782-3728	RAYMOND G. WILSON
Telephone Number	Printed Name
775-782-3728	PO BOX 309 - MINDEN, NV 89423
Fax Number	PO BOX 309 - MINDEN, NV 89423 Mailing Address
E-mail Address	
MINDEN TOWN BOARD	
Office or Position	

If you are required to file a financial disclosure statement pursuant to NRS 281.561, this form must accompany the first statement of financial disclosure you file. If you are an appointed public officer who will be entitled to receive less than \$6,000 per year of service and will not have to file a statement of financial disclosure, please file the form within 60 days of your appointment to office.